FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	
1. NAME OF COMMITTEE (in	(Check if name Example: If typying, type	Office use only 12FE4M5
ÇAŖDĮNĄL HĘ	:AĻTḤ IŅC, PAÇ A/K/A ÇARDINAL HEALTH COMPANIĘS PA	
ADDRESS (number and s	street) 7000 CARDINAL PLACE	
(Check if address	·	
is changed)	DUBLIN	OH 43017 -
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	IL ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	alcox@comerica.com	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address		
is changed)		
2. DATE 0.7		
3. FEC IDENTIFICA	TION NUMBER C C00332833	
4. IS THIS STATEM	NEW (N) OR X AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct a	and complete
	Troccurer Ronald S. Siemiontkoswki	
Type or Print Name of	Treasurer	
Signature of Treasurer	Electronically Filed by Ronald S. Siemiontkoswki	Date 07 / 27 / Y Y Y Y
NOTE: Submission of fal	lse, erroneous, or incomplete information may subject the person signing this Sta	,
Office	For further information	
Use Only	Federal Election Commis Toll Free 800-424-9530	(Revised 02/2009)